MULTIPLE DEPENDENT CLAIM SERIAL NO FILING DATE APPLICANT(S) FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AFTER **AS FILED** AFTER AS FILED I"AMENDMENT 2 [™] AMENDMENT AFTER .I"AMENDMENT 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. <u>67</u> 5· TOTAL IND. TOTAL DOD TOTAL DEP 3 TOTAL DEP CLAIMS

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PTO - 1360 (REV. 11/04)